

## Nurses

ALL BENEFITS ARE PER PAY PERIOD UNLESS OTHERWISE NOTED

Representation	California Nurses Association	
Contract Date	2014-2017	
Health and Welfare		
Benefit Level	Full Time (61 – 80 hours)	
Medical Premium Subsidy (MPS)	Employee Only \$160.23 Employee + 1 \$333.61 Employee + 2 \$450.32	
Medical Opt-Out/Waive	\$40.00	
Vision	Employee Only coverage paid for by the County  Employee may purchase dependent coverage:  Coverage Level Bi-Weekly Rate  Employee +1 \$3.57  Employee +2 or more \$9.55	
Life Insurance Employer Paid	\$25,000	
Voluntary Term Life	\$10,000 - \$700,000	
Voluntary AD&D	\$10,000 - \$250,000	
Leave Provisions		
Vacation	80-160 hours/year	
Sick	3.39 hours	
Bereavement	2 days per occurrence	
Holiday	13 + 1 floating/year	
Perfect Attendance	Annual Gym Membership Reimbursement up to \$299 -OR- Annual 16 hours of Perfect Attendance Leave	
Retirement		
Tier I  Hired PRIOR TO January 1, 2013 reciprocity provision may apply	2.0% at age 55	
Tier II  Hired ON or AFTER January 1, 2013 reciprocity provision may apply	2.5% at age 67	
Retirement – Other		
457(b)	Eligible to enroll at any time	

Retirement Medical Trust Fund - Sick Leave Conversion	Employees become eligible to convert a portion of their sick leave to the Retirement Medical Trust upon attaining 10 or more years of participation with SBCERA and/or other public retirement system(s).
Retirement Medical Trust Fund - County Contribution	County Contribution, based on years of continuous service:  10-14 years = 1.00% of bi-weekly base salary  15+ years = 1.5% of bi-weekly base salary
Other	
Annual Tuition Reimbursement	\$700 per year, w/carryover from previous year not to exceed a balance of \$1,400/year
Dependent Care Assistance Plan	Eligible
Medical Expense Reimbursement Plan (Flexible Spending Account)	\$5-\$98.07 employee contribution per pay period
Qualified Transportation Plan	Pre-tax deductions of up to \$255/month for qualified transportation (commuter) expenses
Short Term Disability	55% up to \$1,173/week

The County provides a *Medical Premium Subsidy* biweekly to help off-set the cost of your medical and dental premiums.

**Example 1:** A Clinical Nurse Specialist elects Blue Shield Signature HMO and Cigna Dental Care HMO plans with Employee Only coverage.

\$238.28 (combined cost of premiums)

- \$160.23 (medical premium subsidy)

\$ 78.05 (out-of-pocket cost)

**Example 2:** A Correctional Nurse I elects Kaiser Permanente and Cigna Dental PPO plans with Employee + 2 or more coverage.

\$838.66 (combined cost of premiums)

- \$450.32 (medical premium subsidy)

\$388.34 (out-of-pocket cost)

**Example 3:** A Nurse Recruiter elects Blue Shield Signature HMO and Cigna Dental Care HMO plans with Employee + 2 or more coverage.

\$663.03 (combined cost of premiums)

- \$450.32 (medical premium subsidy)

\$212.71 (out-of-pocket cost)